

# choices

## 2010 enrollment highlights guide

### it's time to enroll

How to Keep, Change, or Waive Coverage  
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Annual Enrollment  
Enroll by phone:  
1-888-822-0487

Enroll online:  
[mylacountybenefits.com](http://mylacountybenefits.com)

Questions? The Benefits Hotline can help.  
Representatives are available Monday through  
Friday, 8 a.m. to 4 p.m., plus Saturday, October 31  
1-213-388-9982





If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see the prescription drug coverage and Medicare notice on page 4 for more details.

Your **Choices** benefit program is a joint effort of the County of Los Angeles and the Coalition of County Unions (CCU). They work together to negotiate the choices that are offered, the amount of the monthly benefit allowance, and other details of the program.

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# welcome to annual enrollment 2010

Welcome to annual enrollment for your County of Los Angeles *Choices* flexible benefits program. This is a great time to explore all of the County's medical, dental, and life insurance programs and choose those that best meet your and your family's needs.

## What's Changing in 2010

Though your *Choices* plan options are not changing in 2010, take a little time to review the types and levels of coverage *Choices* offers and consider how your and your family's needs may have changed. Review your *Personalized Enrollment Worksheet* and decide how factors such as increased premiums and any new features offered in the individual plans could make some choices a better fit for you.

## When to Enroll

Annual enrollment for County of Los Angeles employees is **October 1 through 31, 2009**. Your enrollment packet includes information you need to enroll:

- **A *Personalized Enrollment Worksheet*** that shows your current plan elections, monthly benefit allowance and premium rates for 2010. It also includes the employee number and PIN that you'll need to enroll.
- **This *Annual Enrollment Highlights Guide***, with an overview of your enrollment options and instructions on how to enroll.
- **A *Medical and Dental Plans Comparison Chart*** that provides details on your medical and dental plan options, allowing you to compare specific plan features such as deductibles and out-of-pocket costs.

We encourage you to take time to explore the enclosed enrollment communications and consider which benefit plans are right for you in the coming year.

We wish you and your family a healthy 2010.



## introducing mylacountybenefits.com

The mylacountybenefits.com Web site will help you make informed benefit choices and provide useful tools and detailed information that you can use as you prepare to enroll and throughout the year. It will also serve as your new gateway to the online enrollment Web site formerly found at [www.buckhrsolutions.com/countyla](http://www.buckhrsolutions.com/countyla). You'll find login instructions on the next page.

### Tools you can use

The Web site includes access to all of the information you receive in your annual enrollment packet and much more. Online tutorials provide step-by-step audio-visual presentations to educate you on your *Choices* benefits and how to get the most out of them. Online calculators will help you determine your health care or dependent care costs and how much you may want to set aside in a Health Care or Dependent Care Spending Account to reduce your out-of-pocket costs each year.

mylacountybenefits.com is arranged in three sections:

### my benefits

- Detailed benefit plan information that can guide you through your enrollment
- Facts on eligibility when adding dependents
- Downloadable *Choices* Summary Plan Description (SPD)
- Contact information for all health plans
- Links to benefit documents
- Resources to help you find doctors and dentists in your health plan networks

### my health

- Links to and information on wellness programs
- Up-to-date calendars for wellness fairs and Webinars
- Archives of the County's new *For Your Benefit* wellness newsletter

### my tools

- Access to the benefit enrollment system
- Calculators to help you figure out how much to save in your Health Care and Dependent Care Spending Accounts
- Audio-visual tutorials on:
  - Enrollment at annual enrollment and when you have a qualified change in status
  - Flexible Spending Accounts
  - Highlights of your *Choices* plans

Best of all, mylacountybenefits.com gives you access to detailed information and tools seven days a week, 24 hours a day. You'll always have the information you need at your fingertips.



# it's time to enroll



## Don't Miss Your Chance to Enroll October 1 through 31, 2009!

If you don't enroll by October 31, you'll have to wait until October 2010 to make any changes (unless you experience a qualified change in status—for example, you get married or have a child; please refer to the *Choices* Summary Plan Description (SPD) for more details). If you have an FSA, you **MUST** reenroll to participate in 2010. Don't miss your chance to change your benefit elections.

## Choices Summary Plan Description

This packet often refers you to the *Choices* Summary Plan Description (SPD). You received a hard copy of the SPD in last year's annual enrollment packet or in your new hire packet. If you do not have your copy, you may download one at [mylacountybenefits.com](http://mylacountybenefits.com).

Annual enrollment is the time to review your benefit choices and consider whether they're right for you or if it's time for a change. Perhaps your or your family's medical or dental care needs changed or you added a dependent and you want to explore your coverage options. Or perhaps you want to consider enrolling in a Flexible Spending Account (FSA). This guide and the enclosed materials are designed to help you understand your options, compare your costs, and decide which benefits are right for you and your family.

## Enrolling is easy! Follow these simple steps.

# 1

### Read your enrollment materials.

Your *Choices* benefit program offers a range of benefit plans and choices. This is the time to consider your options in light of your and your family's needs.

**If you choose to keep the same plans, you do not have to enroll unless you use a Flexible Spending Account, which requires reenrollment each year.**

# 2

### Consider how you might save money using an FSA. FSAs are an easy way to save on eligible health care and dependent care expenses.

Use the Health Care Cost and FSA calculators in the "my tools" section of [mylacountybenefits.com](http://mylacountybenefits.com) to help you decide. Plus, if you enroll in a Dependent Care Spending Account, the County contributes up to \$375 monthly depending on your annual base pay. Make sure you read all the details starting on page 32 of the SPD before you sign up.



## Adding dependents?

If you are adding dependents to your coverage in 2010, the County must receive proof of their dependent status within 10 calendar days from the date you enroll. Refer to your SPD for detailed information about documentation that proves dependent status. You will also need to provide a Social Security number for each new dependent.\*

**IMPORTANT:** If your documentation is not received by the County within 10 calendar days of your enrollment, your dependents will not be covered and you will not be allowed to add them until the next year.



## 3

**Enroll.** After you determine which options are right for you, gather the information you'll need. Now, it's time to enroll! Be sure you have your *Personalized Enrollment Worksheet* with your employee number and PIN. You can enroll:

- **Online at [mylacountybenefits.com](http://mylacountybenefits.com)**

You will use the same employee number and PIN (found on your *Personalized Enrollment Worksheet*) you've always used to log in to [mylacountybenefits.com](http://mylacountybenefits.com). You can use the online enrollment tutorial and other tools to help you make your choices and then follow the instructions provided online. Be sure to click "CONFIRM" and print your 2010 confirmation statement before logging off.

- **By phone at 1-888-822-0487**

Follow the recorded instructions. Don't hang up until you hear "Your benefit elections have been confirmed and recorded." You will receive a confirmation statement in the mail within seven days. If you don't receive your statement, call the Benefits Hotline at 1-213-388-9982.

Even if you prefer to enroll by phone, don't miss out on the information and tools available to you at [mylacountybenefits.com](http://mylacountybenefits.com). Once you're there, why not try online enrollment? Using the online system allows you to check your confirmation statement immediately for any errors and fix them right away.

## 4

► **Review your confirmation statement.** When you have your confirmation statement, review it carefully to ensure that all information is correct. You should file this statement, along with other important benefit information, so that you have it for future reference.

### **\*New Dependent Social Security Number Requirement**

During annual enrollment, be prepared to provide Social Security numbers for your family members if you make changes to your medical plan or add dependents. This is so your medical plan can comply with new federal reporting requirements to the Centers for Medicare & Medicaid Services (CMS).

# important notice from the county of los angeles about your prescription drug coverage and medicare

Please read this notice carefully and keep it where you can find it.

This notice provides information about your current prescription drug coverage under the County of Los Angeles (County) **Choices** Plan, the prescription drug coverage that will be provided under **Choices** as of January 1, 2010, and prescription drug coverage available for individuals with Medicare. It also explains the options you have under Medicare prescription drug coverage and can help you decide whether you want to enroll in this coverage. If you are considering enrolling in a Medicare prescription drug plan, you should compare your current coverage, including which drugs are offered and associated costs for those drugs, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. At the end of this notice is information about where you can get help to make decisions about your prescription drug coverage.

There are two important facts you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare through Medicare prescription drug plans and Medicare Advantage Plans (such as an HMO or PPO) that offer prescription drug coverage. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans may offer more coverage for a higher monthly premium.

2. The County determined that the prescription drug coverage currently offered under CIGNA Network HMO and POS, Kaiser HMO, ALADS/Blue Cross Prudent Buyer and CaliforniaCare, CAPE/Blue Shield of California Lite and Classic, and Fire Fighters Local 1014 Medical Plan and the coverage that will be offered under these plans as of January 1, 2010, is on average for all plan participants who participate in any of these health plans expected to pay out as much as the standard Medicare prescription drug coverage will pay, and that such coverage is considered Creditable Coverage. Because all of the health plans available under **Choices** provide Creditable Coverage, you may elect any of these coverage options for the 2010 plan year and not pay a higher premium (a penalty) if you decide to enroll in a Medicare prescription drug plan on a later date, provided that you do not experience a 63-day break in coverage (as discussed in more detail below).

## When Are You Eligible to Enroll in a Medicare Prescription Drug Plan?

You may enroll in a Medicare prescription drug plan when you first become eligible for Medicare and thereafter during each year from November 15th through December 31st.

If you lose your Creditable Coverage under **Choices** through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period to enroll in a Medicare prescription drug plan.

## What Happens to Your Current Creditable Coverage if You Decide to Enroll in a Medicare Prescription Drug Plan?

If you participate in any of the **Kaiser, CIGNA, CAPE/Blue Shield of California** or the **ALADS/ Blue Cross** plans, you may: (1) keep your existing coverage without enrolling in a Part D plan; (2) keep your existing coverage and enroll in a Part D plan as a supplement to that coverage; or (3) drop your existing coverage and enroll in a Part D plan. If you elect Medicare Part D coverage as a supplement to your existing **CAPE/Blue Shield of California** or **ALADS/Blue Cross** coverage, your coverage will be coordinated with Medicare. If you elect Medicare Part D coverage as a supplement to your existing **Kaiser** or **CIGNA** coverage, your current coverage will not be affected. Alternatively, if you elect Medicare Part D coverage through Kaiser and also assign Medicare Parts A and B to **Kaiser**, you will be placed in the Kaiser Sr. Advantage Plan, which will coordinate with Medicare.

If you participate in the Fire Fighters Local 1014 Medical Plan, you may: (1) keep your existing coverage and choose not to enroll in a Part D plan; or (2) drop your existing coverage and enroll in a Part D plan. If you elect Medicare Part D coverage, your coverage under the Fire Fighters Local 1014 Medical Plan will end.

If you decide to join a Medicare drug plan and drop your current coverage, you and your dependents will be able to reenroll in the future during a **Choices** open enrollment period; provided, however, that, if you want to reenroll in the Fire Fighters Local 1014 Medical Plan, you will have to drop coverage under your Medicare drug plan to reenroll.

**Please contact the County of Los Angeles Benefit Plan Administrator for more information about what happens to your coverage if you enroll in a Medicare prescription drug plan.**

## When Will You Pay a Higher Premium (a Penalty) to Join a Medicare Prescription Drug Plan?

It is important to note that if you drop or lose your coverage with the County and, although you are eligible to do so, you do not enroll in a Medicare prescription drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to enroll in a Medicare prescription drug plan on a later date.

If you go 63 continuous days or longer without Creditable Coverage, when you enroll in Medicare prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have such coverage. For example, if you go nineteen months without Creditable Coverage, your premium under Medicare may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) for as long as you have Medicare prescription drug coverage. Additionally, you may have to

wait until the beginning of the next enrollment period for Medicare prescription drug plans (i.e., November 15th) to enroll in the Medicare coverage.

## For More Information About this Notice or Your Current Prescription Drug Coverage...

Please contact the **County of Los Angeles Benefit Plan Administrator** at the address listed on this page or the **Benefits Hotline** at the phone number listed on this page for further information.

**NOTE:** You will receive this notice at other times in the future indicating that you may enroll in Medicare prescription drug coverage. For example, you will receive this notice prior to the next annual enrollment period during which you may enroll in Medicare coverage and you will also receive a notice if your current prescription drug coverage with the County changes. You may request a copy of this notice by contacting the County of Los Angeles Benefit Plan Administrator at the address or phone number listed on this page.

## For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. If you are eligible for Medicare, you will get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. For more information about Medicare prescription drug plans:

- Visit [www.medicare.gov](http://www.medicare.gov),
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the Medicare & You handbook for their telephone number) for personalized help, or
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) online at [www.socialsecurity.gov](http://www.socialsecurity.gov), or you may call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember to keep this notice. If you enroll in a Medicare drug plan, you may be required to provide a copy of this notice when you join to show that you maintained Creditable Coverage and that you are not required to pay a higher premium amount for coverage (a penalty).

Date: **September 15, 2009**

Entity providing this Notice: **County of Los Angeles**

Contact: **Benefit Plan Administrator**

Address: **3333 Wilshire Boulevard, Suite 1000, Los Angeles, CA 90010**

Benefits Hotline: **1-213-388-9982**

# your benefits

The County of Los Angeles and Coalition of County Unions care about you and your family. That's why we offer benefits that provide for your needs today and in the future. Through a comprehensive benefit program that includes medical, dental, life, and LTD health insurance, we help you enrich your life while protecting your future and your loved ones.

## CHOICES 2010 BENEFITS AT A GLANCE

Medical	
• Kaiser HMO	• CAPE/Blue Shield POS (Classic & Lite)
• CIGNA Network HMO	• ALADS/Anthem Blue Cross CaliforniaCare HMO (Basic & Premier)*
• CIGNA Network POS	• ALADS/Anthem Blue Cross Prudent Buyer PPO (Basic & Premier)*
	• Fire Fighters Local 1014 Medical Plan (for Local 1014 members only)
Dental	
• SafeGuard HMO-style plan	• ALADS/Anthem Blue Cross Premier PPO-style plan (included in ALADS/Anthem Blue Cross Premier medical plans)
• DeltaCare HMO-style plan	
• Delta Dental PPO-style plan	
Life Insurance	
• Basic term life insurance	
• Optional group term life insurance	
• Dependent term life insurance	
Accidental Death and Dismemberment (AD&D) Insurance	
Medical Coverage Protection (Long Term Disability Health Insurance)	
Flexible Spending Accounts (FSAs)	
• Health Care Spending Account	
• Dependent Care Spending Account	

\*Available only to all sworn Peace Officers eligible to be members of ALADS (Bargaining Unit 611), and employees in Bargaining Units 612, 614, 621, 631, 632, 641, and 642.

## Your Medical Plan Choices

Your **Choices** program offers the following medical plans:

- Kaiser HMO
- CIGNA Network HMO
- CIGNA Network POS
- CAPE/Blue Shield POS (Classic & Lite)

- ALADS/Anthem Blue Cross CaliforniaCare HMO (Basic & Premier)
- ALADS/Anthem Blue Cross Prudent Buyer PPO (Basic & Premier)
- Fire Fighters Local 1014 Medical Plan (for Local 1014 members only).

An HMO (health maintenance organization) requires you to receive all of your care from members of a network of participating

## Thinking about changing medical plans or wanting to find a new doctor?

- **For CIGNA Network HMO or POS:** Go online to [cigna.com](http://cigna.com). On the main page, click on "Find a Doctor" (in the middle of the screen).
- **For Kaiser:** Go online to [my.kp.org/ca/countyofla](http://my.kp.org/ca/countyofla) and click on "clinical staff directory" in the "Get Started Now" section.
- **For ALADS/Anthem Blue Cross HMO or PPO:** Go online to [www.anthem.com/ca/alads](http://www.anthem.com/ca/alads) and click on "Find a Doctor."
- **For CAPE/Blue Shield POS:** Go to [blueshieldca.com](http://blueshieldca.com) and click on "Find a Provider Now."
- **For Fire Fighters Local 1014 Medical Plan:** Go to [local1014medical.org](http://local1014medical.org), click on "Prudent Buyer PPO," and click on the blue hyperlink.



## Thinking about changing dental plans or wanting to find a new dentist?

- **For SafeGuard:** Go online to [www.safeguard.net](http://www.safeguard.net), click on "Dental and Vision Directories," and follow the instructions.
- **For DeltaCare and Delta Dental:** Go online to [deltadentalins.com](http://deltadentalins.com), then click on "Dentists" (in the left sidebar), and select "Dentist Search."
- **For ALADS/Anthem Blue Cross:** Go online to [www.anthem.com/ca/alads](http://www.anthem.com/ca/alads) and click on "Find a Doctor."

## Summary Plan Description

You may download a copy of the *Choices SPD* at [mylacountybenefits.com](http://mylacountybenefits.com). This SPD is a valuable resource for plan information. A copy was provided in last year's annual enrollment packet and in new hire packets.

*This Highlights Guide is not an official Summary Plan Description (SPD) or official plan document. If you need a copy of an official plan document, contact the plan's Customer Service department directly. If there is a difference between what you read in this guide and what you read in an official plan document, the official plan document will rule.*

providers. To be covered for benefits, you must access medical care through your primary care physician (PCP).

A PPO (preferred provider organization) gives you the freedom to choose to go to any network or out-of-network provider. When you go to network providers, the plan pays higher benefits (you pay less).

Under a POS (point-of-service) Plan, you get to choose whether to use a network provider or providers outside the network each time you need health care. You do not need a referral from your PCP to see another physician. However, the plan typically pays more (and your costs are lower) when you go to your PCP and use network providers.

See the *Medical and Dental Plans Comparison Chart* and *Choices SPD* or go to [mylacountybenefits.com](http://mylacountybenefits.com) for more information about each plan's benefits and coverage levels.

## Your Dental Plan Choices

**Your Choices program offers two HMO-style dental plans:**

- SafeGuard
- DeltaCare.

In addition, the program offers the following PPO-style dental plans:

- Delta Dental
- ALADS/Anthem Blue Cross Premier (included in ALADS/Anthem Blue Cross Premier medical plans).

The HMO-style dental plans require that you receive all of your dental care from members of a network of participating dental offices. When you enroll, you choose a dental office,

which becomes your "primary care office," and you must go to this office for all of your dental care.

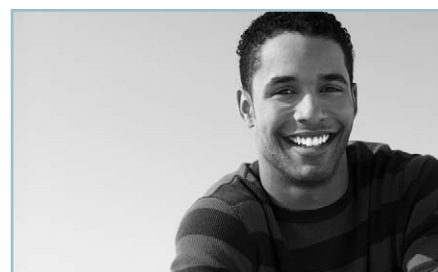
The Delta Dental PPO offers two different networks of participating dentists and dental care providers:

- **Delta Preferred Option (DPO) network:** This network offers the highest benefit. Most preventive services are covered at 100%; many other services are covered at 85%. You pay no deductible. The annual benefit maximum is \$1,500 per person.
- **Delta Participating Dentist network:** Delta pays benefits based on a fee agreement with the network's dentists. Most routine services are covered at 80%. The annual benefit maximum is \$1,200 per person.

The ALADS/Anthem Blue Cross Premier Plan is available only to sworn Peace Officers eligible to be members of ALADS (Bargaining Unit 611), and employees in Bargaining Units 612, 614, 621, 631, 632, 641, and 642.

When you enroll in a PPO, you can go to any dentist in either network, or to an out-of-network dentist. When you go to network providers, the plan pays higher benefits (you pay less).

See your *Choices SPD* and the *Medical and Dental Plans Comparison Chart* or go to [mylacountybenefits.com](http://mylacountybenefits.com) for additional information about your dental plan choices.





# do you have a support system?

Sometimes, the unexpected happens. Your *Choices* program offers life insurance, accidental death and dismemberment insurance, and LTD health insurance to protect you and your family.

## Life Insurance

**The County gives you basic term life insurance at no cost to you.**

- Safety Members of Retirement Plan A or B, or General Members of Retirement Plan A, B, C, or D: You are insured for \$2,000.
- Members of Retirement Plan E: You are insured for \$10,000.

You may buy optional group term life insurance of one to eight times your annual salary at low monthly group rates. You may only increase your insurance amount by one times your annual salary each year.

**Remember, the County pays 15% of the monthly premium.**

If you buy optional group term life insurance for yourself, you may also buy a limited amount of life insurance for your spouse/ domestic partner and dependent children. The *Personalized Enrollment Worksheet* in your enrollment packet shows how much you can buy and the monthly premium rates (your cost). See your *Choices* SPD or go to [mylacountybenefits.com](http://mylacountybenefits.com) for more information.

## Accidental Death and Dismemberment Insurance

You can buy accidental death and dismemberment (AD&D) insurance at low monthly group rates. If you die as a result of an accident, become paralyzed, or lose a limb, eyesight, speech or hearing because of an accident, your AD&D insurance pays benefits.

Look at your *Personalized Enrollment Worksheet* for AD&D coverage costs.

If you have AD&D coverage under *Choices*, you may also buy coverage for your eligible spouse/domestic partner and dependent children. See your *Choices* SPD or go to [mylacountybenefits.com](http://mylacountybenefits.com) for more information.

## Medical Coverage Protection (LTD Health Insurance)

If you are a General (not Safety) Member of Retirement Plan A, B, C, D, or E of the Los Angeles County Employees Retirement Association (LACERA) and are enrolled in a County-sponsored medical plan with guaranteed continuation coverage, such as Kaiser and CIGNA, you are eligible to participate in the LTD health insurance plan. This plan is designed to help you continue your medical insurance coverage if you are eligible for long-term disability and become totally and permanently disabled.

For new disabilities incurred on or after January 1, 2008, all *Choices* participants who meet the eligibility requirements will be covered under the LTD health insurance provisions at no cost to them. LTD health insurance pays 75% of your monthly medical premium and you pay the remaining 25%. Beginning January 1, 2008, eligible employees could elect to “buy-up” to 100% LTD health insurance at a cost of \$3.00 per month. Under this optional coverage, LTD health insurance pays 100% of the monthly medical plan premium while you receive LTD benefits.



**If you do not elect to purchase (or you cancel) the optional 100 percent LTD health insurance coverage for a Plan Year, you cannot elect this coverage for the next Plan Year. You must wait two calendar years before you again have the option to elect this coverage.**

# enhance your life:

## save money using flexible spending accounts (FSAs)

**Reminder: You must reenroll in FSAs each year if you wish to participate.**

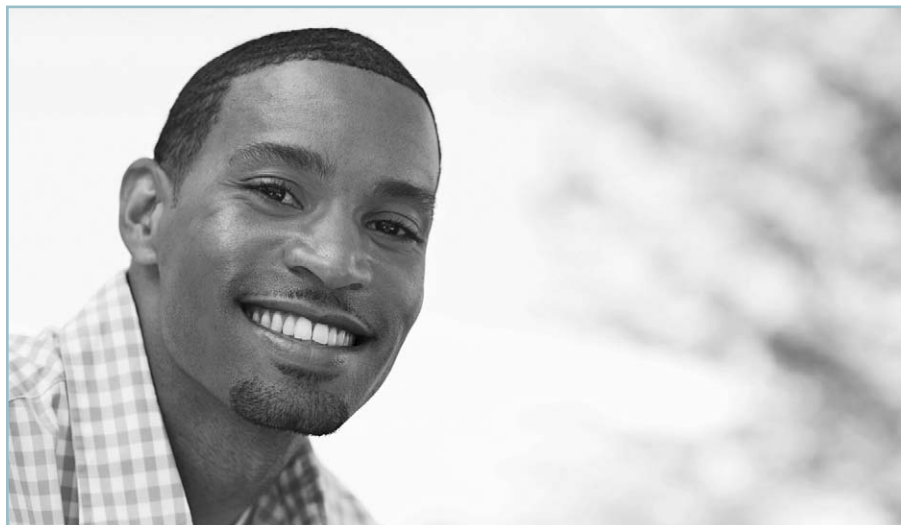
What if you could reduce your out-of-pocket health care expenses by 10% to 30% or more? How about reducing the cost to provide care for your kids or adult dependents while you work? If that sounds good, consider enrolling in a Flexible Spending Account (FSA). With an FSA you never pay federal or state taxes on the money you contribute. Depending on your tax bracket, you can save 12 to 42 cents on every dollar you spend in eligible expenses.

*Choices* offers two types of FSAs: a Health Care Spending Account and a Dependent Care Spending Account. You may enroll in one or both spending accounts. Here's how they work:

- You enroll in the Health Care Spending Account and/or Dependent Care Spending Account during annual enrollment. When you enroll, you decide how much to contribute to each account. You may contribute a maximum of \$400 a month to each account in 2010. The County will contribute up to \$375 monthly to your Dependent

Care Spending Account, depending on your annual base pay. (The maximum you may contribute to the Dependent Care Spending Account is \$4,800 a year if married and filing jointly, or \$2,500 if married and filing separately. The County's contribution to the Dependent Care Spending Account counts toward these limits.)

- You can use the FSA calculators in the "my tools" section of [mylacountybenefits.com](http://mylacountybenefits.com) to work out how much you want to contribute. You'll also find estimation worksheets on pages 32 and 37 of your *Choices* SPD.
- Your contributions are taken out of each paycheck on a before-tax basis and credited to a recordkeeping account in your name. This begins with your first paycheck in January.
- You pay eligible health care and/or dependent care expenses and submit a claim form to the FSA administrator. The FSA administrator reimburses you and debits the amount from your recordkeeping account. You effectively pay your expenses with tax-free dollars!





## Important FSA Considerations

- **Health Care Spending Account** — Your account may be used for “eligible expenses” incurred by you or your spouse (within the meaning of federal tax law\*) and your other dependents. Eligible expenses include those often not covered by your health plans, such as **medical and dental deductibles and copayments**; routine physical exams; orthodontia; vision care (including prescription eyeglasses and sunglasses, contact lenses and solution, laser eye surgery, and nonprescription reading glasses); over-the-counter medications; hearing aids and tests; and smoking-cessation programs, nicotine patches, and nicotine gum. For a complete list of eligible and ineligible expenses, refer to IRS Publication 502 at [www.irs.gov/formspubs/index.html](http://www.irs.gov/formspubs/index.html).
- **Dependent Care Spending Account** — You may contribute up to \$400\*\* per month. “Eligible expenses” include out-of-pocket expenses for the care of your child(ren) under age 13, or a spouse (within the meaning of federal law\*)

or dependent parent who is incapable of self-care, so that you (and your spouse if you are married) can work or attend school full-time. Eligible expenses include child and adult **day care provided at your home; nursery schools and preschools** (if the cost of schooling cannot be separated from the cost of care); **properly licensed day care centers** that care for six or more children (including summer day camps); **care outside the home for children and adult dependents**; and the **cost of transportation** of a qualifying individual by the care provider to or from the place care is provided.

- **Expenses for both types of FSAs must be incurred by December 31, 2010 and submitted for reimbursement by June 30, 2011.** Under the County’s program, some expenses (such as insurance premiums) are not eligible for reimbursement under the Health Care Spending Account. See the *Choices SPD* for more information.
- You have to use these accounts by a certain date. The only catch with FSAs is that you have to use the

money you put in them before they “expire.” An IRS rule states that any money in your FSAs that isn’t spent by the end of the specified period must be forfeited. But don’t let that stop you from taking advantage of the great tax benefits FSAs offer. Just take a little time to plan, and don’t put more in your account than you think you need to spend for the year. Be sure to read the FSA section of your *Choices SPD* before you enroll.

### Added Bonus for the Dependent Care Spending Account

If you enroll in the Dependent Care Spending Account, the County will make a nontaxable monthly contribution based on your annual base pay. And you don’t even need to contribute to get this! See the chart below to find out how much the County will contribute in 2010. Please note that you can make contributions in addition to those made by the County—you just have to be sure that the combined contribution doesn’t exceed IRS limits. **Remember, you must enroll in the Dependent Care Spending Account to be eligible for the County contribution.**

YOUR ANNUAL BASE PAY	COUNTY’S MONTHLY CONTRIBUTION (Subject to Annual Cap on Contribution)
Less than \$30,000	\$375
\$30,000 to \$34,999	\$300
\$35,000 to \$39,999	\$275
\$40,000 to \$44,999	\$200
\$45,000 to \$49,999	\$125
\$50,000 or more	\$75

Important Note: The Coalition of County Unions and the plan sponsor, the County of Los Angeles, agreed to an annual maximum dollar amount the County will spend for this benefit in 2010 and how this benefit will be administered. This benefit will be monitored on a monthly basis. If the dollar maximum is reached in any month in 2010, the contribution you receive from the County will be reduced that month and will be suspended for the remainder of the plan year. In addition, you may be allowed to make other changes that are consistent with a qualifying change in status, cost, or coverage (for example, revoking your election if your dependent care provider quits or terminates its contract with you). See your *Choices SPD* or go to [mylacountybenefits.com](http://mylacountybenefits.com) for more information.

\* A “spouse” is defined uniformly for all federal laws as a person of the opposite sex who is a husband or wife.

\*\* The County’s contribution reduces the amount you can contribute, but that means you are spending even less on dependent care.

## Contact Information

Contact	Phone Number	Web Site
<b>COUNTY DEPARTMENT OF HUMAN RESOURCES</b>		
Benefits Hotline	213-388-9982	N/A
Web site	N/A	<a href="http://dhr.lacounty.info/">http://dhr.lacounty.info/</a>
<b>BENEFITS SYSTEM</b>		
Web enrollment	N/A	<a href="http://mylacountybenefits.com">mylacountybenefits.com</a>
Telephone enrollment	888-822-0487	N/A
Fax	310-788-8775	N/A
<b>MEDICAL</b>		
CIGNA	800-842-6635	<a href="http://cigna.com">cigna.com</a>
Kaiser Permanente	800-464-4000	<a href="http://my.kp.org/ca/countyofla">my.kp.org/ca/countyofla</a>
ALADS/Anthem Blue Cross (HMO)	800-842-6635	<a href="http://www.anthem.com/ca/alads">www.anthem.com/ca/alads</a>
ALADS/Anthem Blue Cross (PPO)	800-842-6635	<a href="http://www.anthem.com/ca/alads">www.anthem.com/ca/alads</a>
CAPE/Blue Shield	800-487-3092	<a href="http://blueshieldca.com">blueshieldca.com</a>
Fire Fighters Local 1014	800-660-1014	<a href="http://local1014medical.org">local1014medical.org</a>
<b>DENTAL</b>		
SafeGuard	800-880-1800	<a href="http://www.safeguard.net">www.safeguard.net</a>
DeltaCare	800-422-4234	<a href="http://deltadentalins.com">deltadentalins.com</a>
Delta Dental	888-335-8227	<a href="http://deltadentalins.com">deltadentalins.com</a>
ALADS/Blue Cross (dental)	800-842-6635	<a href="http://www.anthem.com/ca/alads">www.anthem.com/ca/alads</a>
<b>FLEXIBLE SPENDING ACCOUNTS</b>		
Administrator (Ceridian)	866-300-2303	<a href="http://mylacountybenefits.com">mylacountybenefits.com</a>
Fax	888-367-3305	N/A
<b>LIFE AND AD&amp;D</b>		
CIGNA Life	800-842-6635	<a href="http://cigna.com">cigna.com</a>



**WE ARE THE COUNTY OF LOS ANGELES**

*This newsletter is printed on recycled paper to support  
the County's commitment to the environment.*

